FORM D

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

1	18	9	4	2

OMB APPROVAL

OMB Number:

3235-0076

Expires:

May 31, 2005

Estimated average burden

hours per response..... SEC USE ONLY

Prefix

Serial

DATE RECEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series B Convertible Preferred Stock, and the Common Stock into which it may be converted; War Stock, the Series B Convertible Preferred Stock issuable upon exercise thereof., and the Common S	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: New Filing Amendment	Section 4(6) ULOE
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) SoloMio Corporation	03025528
Address of Executive Offices (Number and Street, City, State, Zip Code) 1011 San Jacinto, 5th Floor, Austin, TX 78701	Telephone Number (Including Area Code) (512) 478-7122
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Same	Telephone Number (Including Area Code) Same
Brief Description of Business Telecommunications software provider	PROCESSED
Type of Business Organization Corporation Dimited partnership, already formed Disiness trust Dimited partnership, to be formed Other	PROCESSED JUN 3 0 2003 (please specify):
Actual or Estimated Date of Incorporation or Organization: Month Year	Actual Estimated tate: D E
GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or	Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

		A	. BASIC IDI	ENTI	FICATION DATA				
Each beneficial ownEach executive offi	e issuer, if the issuer h	as beer vote o orate i	or dispose, or direct the ssuers and of corporat	vote	or disposition of, 10%				securities of the issuer, and
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Daniel, William R.		,		<u>.</u>					
Business or Residence Addre	ess (Number and Stree	t, City	, State, Zip Code)						
c/o SoloMio Corporation, 1	014 San Jacinto, 5 th	Floor,	Austin, TX 78701			_			
Check Box(es) that Apply:	Promoter	\boxtimes	Beneficial Owner	Ø	Executive Officer	☒	Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Schwartz, Richard L.	······································								
Business or Residence Addre	ess (Number and Stree	t, City	, State, Zip Code)						
c/o SoloMio Corporation, 1	014 San Jacinto, 5 th	Floor,	Austin, TX 78701						·
Check Box(es) that Apply:	Promoter	\boxtimes	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Thornton, John	·								
Business or Residence Addre	ess (Number and Stree	t, City	, State, Zip Code)						
c/o Austin Ventures, 300 W	est 6th Street, Suite 2	300, A	Austin, TX 78701						
Check Box(es) that Apply:	Promoter	\boxtimes	Beneficial Owner		Executive Officer	\boxtimes	Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Vandegrift, Steve					·				
Business or Residence Addre	ess (Number and Stree	t, City	, State, Zip Code)						
c/o Techxas Ventures, 5000	Plaza on the Lake, S	Suite 2	275, Austin, TX 787	46					
Check Box(es) that Apply:	Promoter	\boxtimes	Beneficial Owner	X	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Frick, Laurie									
Business or Residence Addre c/o SoloMio Corporation, 1	•		•						
Check Box(es) that Apply:	Promoter	×	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)							-	
Vignette Corporation									
Business or Residence Addre	ess (Number and Stree	t, City	, State, Zip Code)				-		
901 South Mopac Expressy	ay, Building 3, Aust	in, TX	78746						
Check Box(es) that Apply:	Promoter	\boxtimes	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Techxas Ventures Funds	<u> </u>								
Business or Residence Addre	ess (Number and Stree	t, City	, State, Zip Code)						
5000 Plaza on the Lake, Su	ite 275, Austin, TX 7	8746							
	(Tice blank	cheet	or conv and use add	litions	I conies of this sheet	25 10	ecessary)		

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	findividual)				
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			
300 West 6th Street, Suite 23	300, Austin, TX 7870	01	•		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it Koch Ventures, LLC	findividual)				
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			
5950 Berkshire Lane, Suite	1000, Dallas, TX 75	225			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	⊠ Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)				
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			
c/o 5950 Berkshire Lane, Su	iite 1000, Dallas, TX	75225			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Luehrig, Uwe					
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			
Marsdorfer Str. 62, 50858 I	Koeln, Germany				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Evans, Stuart				· · · · · · · · · · · · · · · · · · ·	·
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			
3 Upper Stanway Barns, Ru	ishbury, Shropshire	, U.K., SY67EF			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Partech International and r	elated funds	·	· · · · · · · · · · · · · · · · · · · 		
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			
50 California Street, Suite 3	200, San Francisco,	CA 94111			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)			•	
Welsh, David		-xx			
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			•
50 California Street, Suite 3	200, San Francisco,	CA 94111			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ess (Number and Stree	et, City, State, Zip Code)			

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				В.	INFOR	MATION A	ABOUT OF	FERING				
l. Has	the issuer sold,	or does the i	ssuer intend t	o sell to no	n-accredited	investors in t	his offering?)			Yes	No ⊠
1. 1143	me issuer solu,	or does are r	ssuci intend					ınder ULOE.				
2. Wha	t is the minimu	m investmen	t that will be				_				\$	n/a
3. Does	the offering p	emit joint o	amerchin of a	cinale unit?							Yes ⊠	No
	r the informatic											
remu	meration for so	licitation of p	urchasers in	connection w	rith sales of s	ecurities in th	ne offering. I	f a person to b	e listed is ar	associated		
	on or agent of a five (5) person:		_									
	er only.	:6:	1)									
ruii Name	(Last name fir	st, ii maivial	uai)					i				
Business o	or Residence A	idress (Num	ber and Stree	t, City, State	, Zip Code)							
Name of A	Associated Brok	er or Dealer	 						· · · · · · · · · · · · · · · · · · ·		·· ····	
States in V	Vhich Person L	isted Has So	licited or Inte	nds to Solic	it Purchasers				·			
(Check	"All States" or	check indivi	duals States)								□ A	Il States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	(CT)	[DE]	[DC]	· (FL)	[GA]	(HI)	[ID]
(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	(NE)	[NV]	(NH)	נעזן	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]
[RI]	(SC)	[SD]	[TN]	[TX]	(UT)	[VT]	 [VA]	[WA]	[WV]	[WI]	(WY)	. , [PR]
Full Name	(Last name fir	st, if individi	ual)			,						
Business of	r Residence A	idress (Num	ber and Stree	t, City, State	, Žip Code)				 -			
							<u>.</u>					
Name of A	Associated Brok	er or Dealer										
States in V	Vhich Person L	isted Has So	licited or Inte	nds to Solic	it Purchasers							
(Check	"All States" or	check indivi	duals States)			•••••••••	••••••••••••••••••••••••••••••••••••••					Il States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	· [PR]
Full Name	(Last name fir	st, if individu	ual)			= .	•	· · · · · · · · · · · · · · · · · · ·				
Business	r Residence A	idress (Numi	ber and Stree	t. City. State	. Zin Code)		- <u>-</u>					
											-	
Name of A	Associated Brok	ter or Dealer										
States in V	Vhich Person L	isted Has So	licited or Inte	nds to Solic	it Purchasers							•
(Check	"All States" or	check indivi	duals States)		••••••		·····				□ A	ll States
[AĻ]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[[1/1]]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
			[TN]									

	indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$0.00	\$0.00
	Equity	\$ 6,500,000.07	\$ 6,500,000.07
	☐ Common ☑ Preferred		
	Convertible Securities (including warrants)	\$40.193.55*	\$0.00
	Partnership Interests	\$0.00	\$0.00
	Other (Specify)	\$0.00	\$0.00
	Total	\$ <u>6,540,193.55</u>	\$ 6,500,000.07
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchase
	Accredited investors	17	\$ <u>6,500,000.07</u>
	Non-accredited Investors	0	\$0.00
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
		T f	Dallan Amana
	Type of Offering	Type of Security	Dollar Amount Sold
	Type of Offering Rule 505	Security	
		Security	
	Rule 505	Security	
	Rule 505 Regulation A	Security	
4.	Rule 505 Regulation A Rule 504	Security	
4.	Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and	Security	
4.	Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	Security	
4.	Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees	Security	Sold \$ \$ \$ \$ \$
4.	Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs	Security	Sold \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
4.	Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs.	Security	Sold \$ \$ \$ \$ \$ \$ \$ \$ \$
4.	Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees	Security	Sold \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
4.	Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees	Security	Sold S S S S S

	C. OFFE	RING PRICE, NUMBER	of investors, expenses and	USE OF PROCEEDS	·
	total expenses furnished in response t	to Part C - Question 4.a. Thi	n in response to Part C - Question 1 and is difference is the "adjusted gross		\$ <u>6.420.000.07</u>
5.	the purposes shown. If the amount for	r any purpose is not known, fi payments listed must equal th	uer used or proposed to be used for each furnish an estimate and check the box to the adjusted gross proceeds to the issuer	ihė	
				Payments to Officers, Directors & Affiliates	Payments To Others
	Salaries and fees			□ s	□ s
	Purchase of real estate			□ s	□ s
	Purchase, rental or leasing and install	lation of machinery and equi	pment	□ s	s
	Construction or leasing of plant build	lings and facilities		□ s	\$
	Acquisition of other businesses (inclused in exchange for the assets or sec	ading the value of securities curities of another issuer pure	involved in this offering that may be suant to a merger)	□ s	s
	Repayment of indebtedness			□ s	s
	Working capital	,		□ s	⊠ \$ <u>6.420.000.07</u>
	Other (specify):	••••••••••••		□ s	\$
	Column Totals	***************************************		□ \$	□ s
	Total Payments Listed (column	totals added)		⊠ \$ <u>6,420,6</u>	000.07
		D.	FEDERAL SIGNATURE		
nde		Securities and Exchange Com	authorized person. If this notice is filed un mission, upon written request of its staff		
	r (Print or Type)	Signature	D	ate	
<u>oloi</u>	Mio Corporation e of Signer (Print or Type)	Title of Signer (Print or Type)	June , 2003	
am	(CEO and Preside	V II - /		

	E. STATE SIGNATURE
Į.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?
	See Appendix, Column 5, for state response.
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filled and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.
	e issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly horized person.
Íss	per (Print or Type) Signature Date
Sol	oMio Corporation June 2003
Ne	me of Signer (Print or Type) Title of Signer (Print or Type)

CEO and President

n

Richard Schwartz

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1		2	3			5			
	Intend non-action investigation	to sell to credited tors in ate -Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			under UL (if yes, explant waiver	ification State OE attach attion of granted -Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA		х	Series B Convertible Preferred Stock and Warrants		\$3,006,264.00	0	0		х
СО						-			
CT									
DE		-							
DC									
FL									
GA									
Н									
ID									
IL .									
IN									
· IA									
KS									
KY									
LA									
ME									
MD									
MA									
MI									
MN .									
MS									
МО									
MT									
NE									
NV									

1		2	3	<u>_</u>	5				
	non-acc invest St	to sell to credited tors in ate -Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of in amount purc (Part C	Disqualification under State ULOE (if yes, attach explanation of waiver granted (Part E-Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
NH	153	1.0		111/03/013	Amount	THI CSTOTS	Alloun	163_	
NJ									
NM									
NY									
NC			·						
ОН							· · · · · · · · · · · · · · · · · · ·	·	
OK			·			· ·			
OR									
PA									
RI ·				· · · · · · · · · · · · · · · · · · ·					
SC			·						
SD									
TN									
TX		Х	Series B Convertible Preferred Stock and Warrants	9	\$3,493,736.07	0	\$0.00		x
UT.									
VT									
VA									
WA									
WI									
WY			_				•		
PR			·	····					

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